

**ZONING BOARD OF APPEALS
AREA VARIANCE FINDINGS & DECISION**

OFFICE USE ONLY

Application No. AV- _____
Date of Application: _____
(Postmarked or Hand Delivered)
Date of Public Hearing: _____
Date Notice Published: _____
Date of County Referral: _____
Date of Final Action: _____
Date of Filing of Decision with the
Municipal Clerk: _____

Applicant: _____

Appeal Concerns Property at the following address:

County Tax Map Section: _____ Block _____ Lot _____

Zoning District Classification: _____

Requirement for which Variance is Requested: _____

Applicable Section(s) of Zoning Code: _____

TEST: No area variance will be granted without a consideration by the board of the following factors:

1. Whether undesirable change would be produced in character of neighborhood or a detriment to nearby properties: Yes ___ No ___

Reasons: _____

2. Whether benefit sought by applicant can be achieved by a feasible alternative to the variance: Yes ___ No ___

Reasons: _____

3. Whether the requested variance is substantial: Yes ___ No ___

Reasons: _____

4. Would the variance have an adverse impact on the physical or environmental conditions in the neighborhood: Yes ___ No ___

Reasons: _____

5. Whether the alleged difficulty was self-created: Yes ___ No ___

Reasons: _____

DETERMINATION OF ZBA BASED ON THE ABOVE FACTORS:

The ZBA, after taking into consideration the above five factors, finds that:

- the Benefit to the Applicant DOES NOT Outweigh the Detriment to the Neighborhood or Community and therefore the variance request is denied.
- the Benefit to the Applicant DOES outweigh the Detriment to the Neighborhood or Community.

Reasons: _____

The ZBA further finds that a variance of _____ from Section _____ of the Zoning Code is the minimum variance that should be granted in order to preserve and protect the character of the neighborhood and the health, safety and welfare of the community because:

CONDITIONS: The ZBA finds that the following conditions are necessary in order to minimize adverse impacts upon the neighborhood or community, for the reasons following:

Condition No. 1: _____

Adverse impact to be minimized: _____

Condition No. 2: _____

Adverse impact to be minimized: _____

Chairman, Zoning Board of Appeals Date



RECORD OF VOTE

	MEMBER NAME	AYE	NAY
Chair	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____